## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/4	8
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼		
KEEP THE PROMISE I	C C00575373	$\neg$
	J. Salitaio	
Check if 24-hour report X 48-hour report New report Amends report filed on		
Full Name of Payee	Date of Public Distribution/Dissemination	on
GLITTERING STEEL LLC	09 12 2015	Y
Mailing Address 8383 WILSHIRE BLVD		
STE 1000	Amount	
City State Zip Code	le 17500.0	00
BEVERLY HILLS CA 90211	Transaction ID : SE.4170  Date of Disbursement or Obligation	
Purpose of Expenditure VIDEO PRODUCTION  Categor Typ	ory/ /pe 09 12 2015	Y
Name of Federal Candidate	Support Office Sought: House District: 0	0
RAFAEL EDWARD 'TED' CRUZ	Oppose President Senate State:	
Calendar Year-To-Date Per Election for Office Sought 0.00	Disbursement For: ☐ Primary ☐ Gen  2016 ☐ Other (specify) ▶	eral
Full Name of Payee		
NOSTROMO FILMS INC.	Date of Public Distribution/Dissemination	
Mailing Address 709 LORRAINE DRIVE	09 12 2015	
- 700 EONNAINE DIVIVE	Amount	
City State Zip Code	de 7500.00	
SOUTHLAKE TX 76092	Transaction ID : SE.4169 Date of Disbursement or Obligation	
Purpose of Expenditure VIDEO PRODUCTION  Categor	ory/	■ Y
No constitution of Francisco Constitution	The state of the s	
Name of Federal Candidate		00
RAFAEL EDWARD 'TED' CRUZ	Oppose President Senate State:	
Calendar Year-To-Date Per Election for Office Sought	0.00 Disbursement For: Primary Gen	neral
	Other (specify) -	
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) CURTOTAL of Unitersized Index and art Fun and itures		
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>)</b>	
(c) TOTAL Independent Expenditures		$\Box$
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
JACQUELYN JAMES  [Electronically Filed] Date 09 14 2015		
Signature	ed) Date 09 14 2015	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
KEEP THE PROMISE I	C C00575373	
Check if 24-hour report		
Full Name of Payee Date of Public Distribution/Dissemination		
SMART SET MEDIA	09 12 2015	
Mailing Address PO BOX 73011	Amount	
City State Zip Code	26000.00	
N. CHESTERFIELD VA 23235	Transaction ID : SE.4171 Date of Disbursement or Obligation	
Purpose of Expenditure MEDIA  Category/ Type	M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O	
Name of Federal Candidate Support Office	Sought: House District: 00	
DAFAEL EDWARD ITED COUR	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disburs 2016	sement For:	
Full Name of Payee	Date of Public Distribution/Dissemination	
Mailing Address	M = M / D = D / Y = Y = Y	
	Amount	
City State Zip Code		
	Date of Disbursement or Obligation	
Purpose of Expenditure  Category/ Type	M M / D D / Y Y Y Y	
	Sought: House District:	
Oppose I	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought	sement For:	
	Cirici (Specify) -	
(a) SUBTOTAL of Itemized Independent Expenditures	26000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	51000.00	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
JACQUELYN JAMES  [Electronically Filed] Date 09		
- 0		